

FREQUENTLY ASKED QUESTIONS & INFORMATION

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- 1) **Can my organization submit two applications?**
 - a) To fulfill our goal of distributing funds equitably across regions and organizations, we will accept only one application per organization per region (see regional map on final page on RFA). It is expected that applications from the same organization in the same region be combined into one. If two or more applications are received from the same organization reaching the same region, they will be competing against each other with only one application having the possibility to be awarded. We encourage organizations submitting more than two applications to prioritize which ones are strongest. However, if your organization has two locations in two different regions that will target different populations, both locations are able to apply.
- 2) **Does this require a match?**
 - a) No, the funding opportunity does not require a match.
- 3) **Is there a specific way to write the application and budget?**
 - a) Yes, please use the provided application and budget templates following the instructions on the Request for Applications (RFA) posted online at: <https://www.in.gov/health/mch/funding-opportunities/>.
- 4) **Why is the budget template only for Year 1 and Year 2?**
 - a) If a performance award is given, a new budget template for January 2024-December 2025 will be requested.
- 5) **Is there a limit for funds that can be requested?**
 - a) Yes, there are tier-levels this year for the number of awards and amount of the awards; however, the maximum ask for two years is \$1,400,000. However, this is subject to change based on the applications received.
- 6) **Which year's IMR will IDOH be referencing to determine if there was a decrease?**
 - a) IDOH will use the most recent available data to compare IMR rates after the first two project years.
- 7) **How much of a decrease needs to be seen in the IMR to be considered for the performance award?**
 - a) Any decrease in the regional IMR will be considered for the performance award. For example, a regional infant mortality rate decreased from 7.2 in 2017 to 7.1 in 2018, and that grantee was awarded for performance.
- 8) **What if I work in multiple counties that span multiple regions, but not all counties in those regions?**
 - a) If you select several regions, whether focusing on specific counties or not, those regional IMR results will be aggregated to determine if you will receive the additional 40% of funding.
- 9) **Am I able to continue to use funds past my contract date, especially if not given a performance award?**
 - a) No, funds must be spent before the end contract date, or they will revert back to IDOH. However, if there are funds left and the performance award is given with a contract extension, those leftover funds will carryover and be eligible for use until the new contract end date.
- 10) **If my organization is a national organization and not based in Indiana, am I still eligible to apply?**
 - a) You may only apply if there is a local Indiana branch that can apply and keep funds in the state.

- 11) **Can I share Safety PIN funds and resources with current partners?**
 - a) Yes, this must be reflected in the application, budget, and quarterly reports if you will engage any subrecipients or contracts.
- 12) **Can there be collaboration of efforts between organizations within a region for this funding opportunity?**
 - a) Yes, this is highly encouraged to help decrease the regional IMR.
- 13) **Do I have to pick a program to implement that is specified in the “RFA Examples” such as safe sleep or home visiting?**
 - a) No, all innovative ideas are welcome to apply for funding. Those two standards are simply there to provide more information.
- 14) **I applied for Title V funding and was not awarded. Can I still apply for Safety PIN?**
 - a) Yes, Title V and Safety PIN are two different grants.
- 15) **I applied to Title V and was awarded. Can I still apply?**
 - a) Yes, as long as your Safety PIN application does not request funding for services and staff already funded through Title V.
- 16) **I currently hold a Safety PIN Grant. Can I apply?**
 - a) Yes, but current sites need to demonstrate how they will expand upon their current work.
- 17) **Is funding guaranteed?**
 - a) Funding is not guaranteed to all applicants as we anticipate a high volume of applicants and are limited in funding. If you are awarded, we will guarantee there is funding to cover all four potential years of the grant.
- 18) **Can mental health centers apply?**
 - a) Yes, mental health centers are eligible for Safety PIN funding.
- 19) **If you apply for a tier, can you be awarded a lower tier amount or are you only eligible for consideration in that one tier?**
 - a) You will primarily be considered for the tier under which you apply, though the state may consider you for another tier based on the total number of applications and total funding available.
- 20) **If we have current Safety Pin grant money from our region, are we able to also apply for this new grant for the same region?**
 - a) Yes, current applicants can apply for funding in the same region, but current contract work, goals, and end dates will be taken into consideration during the scoring process.
- 21) **In the past, we have included MOUs/Letters of support. Should we include those with this year's Safety PIN proposal?**
 - a) No, MOUs and/or Letters of Support are not required for this application.
- 22) **On the Budget Worksheet Schedule A, if there are more than 5 CHWs where would we list the others?**
 - a) You may add a line into the excel sheet and ensure it is captured on the summary or you can reach out to Mary Ellen (mapotts@isdh.in.gov) for assistance in creating a new template.
- 23) **Can you explain the regional approach?**
 - a) Safety PIN's performance award will be based on regional infant mortality rates, not county or area infant mortality rates. Even if you solely work in one county, the performance award will be based off the regional infant mortality rate.

- 24) **Can you explain more on what you said about intention to fund only one application per region.**
a) *See answer to question one.* One application awarded per region only applies to applications from the same organization within a region. There is a potential that more than one organization can be awarded in the same region.
- 25) **How will you look at the infant mortality data since it is delayed by several years in reporting?**
a) IDOH will use the most recent available data to compare infant mortality rates after the first two project years. We recognize that there is a delay in data.
- 26) **How is this different from FIMR funds?**
a) This opportunity is open to all types of programs that focus on reducing infant mortality.
- 27) **Can a lead agency subcontract to local agencies so an entire region is served?**
a) Absolutely, partnership and subcontracting are encouraged to help serve regions. *See question 11.*
- 28) **We provide prenatal assistance to women who are addicted. Would parenting classes for these women be something that this funding could cover?**
a) Yes, this opportunity is open to parenting classes that impact the reduction in infant mortality.
- 29) **Does this grant also cover education for fathers?**
a) Yes, this opportunity is open to parenting classes that impact the reduction in infant mortality.
- 30) **Are there any other criteria that will differentiate the tiers outside of the funding amounts?**
a) No, the tier system is solely based on funding amounts requested. We have limited funding, please only apply for the amount of funding the program needs.
- 31) **Would you consider the 10% for administration costs the same as F&A?**
a) Yes, however Safety PIN has unallowable costs that may fall under F&A and IDOH does not allow indirect costs to be budgeted as a line item, they must be specifically budgeted out. *See page 11 in the guidance for unallowable costs.*
- 32) **Should the funding synopsis include all our programs, or just those related specifically to our proposal?**
a) The other funding synopsis document should include a high-level overview with information about funding for all your programs.
- 33) **For the other funding synopsis, should we put our contact for the state agency funding we receive, or should we put our organization contact on who oversees the program receiving funding?**
a) The contact should be the state agency contact for your organization.
- 34) **How is MCH defining overlapping services?**
a) Overlapping services could be if funding is requested to cover services that already have a funding source for that population or if another organization is already providing those services to that population.
- 35) **The budget is by fiscal year and the application is asking for calendar year. How do we calculate that?**
a) To determining the calendar year amounts, divide the 12-month fiscal year by two and add each have to the other fiscal years.
b) **Example:**

Fiscal Year Breakdown:

FY 2022: \$40,000

FY 2023: \$80,000 (\$40,000 and \$40,000)

FY 2024: \$40,000

Calendar Breakdown:

Calendar Year 1: \$80,000

Calendar Year 2: \$80,000

Total: \$160,000

36) Should the time commitment be placed on the justification?

- a) Yes, please put the hours per week in the budget template but utilize the justification section to discuss the FTE and why it is needed.

37) Can I add data tables or graphs into the fillable pdf application?

- a) With a fillable pdf format, you are unable to add those into the text box. If you'd like to put tables/graphs/figures into a separate document and label each one, you can then submit this with your application. This is not a required component of the application.

38) Should the budget be rounded to the nearest penny?

- a) Yes, please round to the nearest penny.

39) Where should the salaries for staff not directly involved in the program be listed on the budget?

- a) They should be listed in Schedule A in the appropriate category if they are not a contract worker or consultants. It should also be made clear in the justification that they are not directly involved and why the funding to cover this staff member is needed.

INFORMATION:

Example of Goals, Objective, and Activity

Goals: Reduce infant sleep related deaths in our region.

Objectives: By December 2021, 40% of participants will always use the three safe sleep requirements

Activities: Provide safe sleep education at every first appointment

Basic Example of Work Plan Layout

This is only an example of a work plan and should follow the Goals, Objectives, and Activities stated in your application. This does not mean that safe sleep *must be* a goal.

January 2021-January 2023 (60% funding)

Goal 1: Reduce infant sleep related deaths in our region.

Objective 1: By April 2021, 100% of staff will be trained on Safe Sleep Requirements.

Objective Rationale: In order for quick and effective implementation, staff will need to be trained to provide the education

Activity	Person Responsible	Measures of Accomplishment	By When
Find Safe Sleep Training	Project Manager	Successful Registration	January 15 th , 2021
Sign up for training	Project Manager	Successful Registration	January 15 th , 2021
Have Staff attend training	Community Health Worker Coordinator	Attendance	March 31 st , 2021

Objective 2: By December 2021, 40% of participants will always use the three safe sleep requirements

Objective Rationale: In order to reduce infant mortality caused by Safe Sleep, participants need to follow these guidelines.

Activity	Person Responsible	Measures of Accomplishment	By When
Educate all participants on their 3 rd visit.	Community Health Worker	Data Tracking and CHW Report	December 2021 (Continual January-December)
Provide Pack n Plays to 100% of clients in need.	Community Health Worker	Data and Resource Tracking and CHW Report	December 2021 (Continual January-December)

View all client's Infant Sleep Space & provide follow up education if needed	Community Health Worker	Data Tracking and CHW Report	December 2021 (Continual January-December)
Record at each visit how many of the Safe Sleep Requirements each client is following	Community Health Worker	Data Tracking and CHW Report	December 2021 (Continual January-December)